PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Paters, davance orders and notification of maintenance fees will be mainled to the current correspondence address as included unless corrected below or directed otherwise in Block 1, by 6) specifying a now correspondence address; and/or (b) indicated unless corrected below or directed otherwise in Block 1, by 6) specifying a now correspondence address; and/or (b) indicated a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block | for any change of address)

12/22/2006

SONNENSCHEIN NATH & ROSENTHAL LLP

P.O. BOX 061080

26263

WACKER DRIVE STATION, SEARS TOWER

MANUFACTURING A MAGNETORESISTANCE-EFFECT ELEMENT

7590

CHICAGO, IL 60606-1080

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

| Paula M., Theismann | | (Depositor's name) |
|---------------------|------|--------------------|
| Yaula M. M | uman | (Signature) |
| Marhc 12, | 2007 | (Date) |
| | | |

APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 09/822 934 03/30/2001 Tetsuya Mizuguchi TITLE OF INVENTION: MAGNETORESISTANCE-EFFECT ELEMENT, MAGNETORESISTANCE-EFFECT MAGNETIC HEAD, AND METHOD OF

| APPLN TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|---|--------------|--|---------------------|----------------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$0 | \$1700 | 03/22/2007 |
| EXA | MINER | ART UNIT | CLASS-SUBCLASS |] | | |
| DAVIS, DAV | VID DONALD | 2627 | 360-324000 | • | | |
| I. Change of correspondence address or indication of "Fee Address" (37 CFR 1,53). Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Jee Address findication (or "Fee Address" Indication form PTO/SB/1/20 or more recent) attached. Use of a Customer Number is required. | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, atternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | era 2 | 2 | |

. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SONY CORPORATION TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 💆 Corporation or other private group entity 🛄 Government 4a. The following fcc(s) are submitted: 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee

2 Publication Fee (No small entity discount permitted)

Advance Order - # of Copies _

A check is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-3140 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status, Sec 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2).

NOTE: The Issue Pec and Phylication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature March 12, 2007 Date

Typed or printed name

32919 Registration No.

This collection of information is required by 3 CFR 1.311. The information is required to obtain or results a benefit by the public which is to flic (and by the USPTO to process) an application. Confidentially is governed by 3 US.C. 1.22 and 3 CFR 1.14. This collection is estimated to take 1.2 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending under the under the USPTO to the USPTO. The will very depending under the under the

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.